

PATENT APPLICATION TRANSMITTAL LETTER

021704

MAIL STOP PATENT APPLICATION
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

322856 U.S. PTO
 10/780098
 021704



Transmitted herewith for filing of the patent application of:

Inventor(s): **DAVID J. ALLARD, BOYNTON BEACH, FL**
ROBERT M. SZABO, BOCA RATON, FL

Assignee: **INTERNATIONAL BUSINESS MACHINES CORPORATION**

Assignee

Address: **NEW ORCHARD ROAD**
ARMONK, NEW YORK

For: **METHOD, SYSTEM, AND APPARATUS FOR PATIENT
 CONTROLLED ACCESS OF MEDICAL RECORDS**

Enclosed are:

- Specification, including the Abstract
- 1 Sheets of drawings (1 set)
- Executed Declaration and Power of Attorney
- Information Disclosure Statement, Form PTO/SB/08A without References
- Other: 1 postcard

CLAIMS AS FILED

FOR	NO. FILED	NO. EXTRA
Basic Fee		
Total Claims	- 15 -	- 0 -
Indep Claims	- 3 -	- 0 -
Multiple dependent claim present: No		

If the difference in Col. 1 is less than zero, enter "0" in Col. 2

Small Entity

RATE	FEE
	\$
x \$ 9 =	\$
x \$ 43 =	\$
x \$145 =	\$
TOTAL	\$

Other than a Small Entity

RATE	FEE
	\$ 770
x \$ 18 =	\$
x \$ 86 =	\$
x \$290 =	\$
TOTAL	\$ 770

Please charge my Deposit Account No. 50-0951 in the amount of \$ _____.

A check in the amount of \$ 770.00 is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0951. A duplicate of this sheet is enclosed.

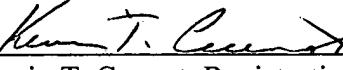
Any additional filing fees required under 37 C.F.R. 1.16.

Any patent application processing fees under 37 C.F.R. 1.17.

No fee enclosed. No fee is authorized.

Date

2/17/04


 Kevin T. Cuenot, Registration No. 46,283

(WP168896;1)

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